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ENCLOSURES (Check all that apply)												
V	Fee Trans	smittal Fo	rm		Drawing(s)	-			After A	Allowance C	communication to	TC
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Firm N	Firm Name Luce, Forward, Hamilton & Scripps LLP											
Signature Pluste a breains												
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Date April 1.		5, z	5, 2005		Reg. No.	34,408						
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Fo		First Named Inv	ventor Si	r Stringer					
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Applicant claims sma	Il entity status	s. See 37 CFR 1.27		Art Unit 3762					
TOTAL AMOUNT OF PAY	YMENT (\$	245.00		Attorney Docke	t No. C	VN-011 CON			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 50-2298 Deposit Account Name: Luce, Forward, Hamilton & Scripps LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
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1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity									
Application Type	Fee (\$)		ee (\$)	Small Entity Fee (\$)	Fee (\$	Fee (\$)	Fees Paid (\$)		
Utility	300	150 5	500	250	200	100			
Design	200	100 1	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150 5	500	250	600	300			
Provisional	200	100	0	0	0	0	-		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Small Entity Fee (\$) Fee (\$) 25 25 100 100 180									
Total Claims	Extra Clair		Fee F	Paid (\$)			ependent Claims Fee Paid (\$)		
- 20 or HP = HP = highest number of tot Indep. Claims - 3 or HP = HP = highest number of indep.	Extra Clair	for, if greater than 20. ims		<u></u> Paid (\$) 		<u>Fee (\$)</u> 	ree raio (4)		
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
• •	fication, \$	/50 = 130 fee (no small er	ntity d	iscount)		,	Fees Paid (\$)		
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SUBMITTED BY			1		
Signature	lecro	ti a	Juan	Registration No. (Attorney/Agent) 34,408	Telephone 858-720-6320
Name (Print/Type)	Nicola A. Pisano	-			Date 4-15.03

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